STATE OF MAINE

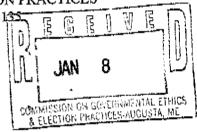


COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station, Augusta, Maine 04333-013
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STATEMENT OF SOURCES OF INCOME 1 M.R.S.A. §§ 1016-A et seq.

COVERING THE CALENDAR YEAR JANUARY 1, 2006 THROUGH DECEMBER 31, 2006

FULL NAME: _	Postede Edmond	Please check the appropriate box and fill in the District number.
MAILING ADDRESS: _ CITY:	Freeze	Member of the Senate, District_/6
ZIP CODE: _	04632	·
PHONE NUMBER: _	865-3569	Member of the House, District

GENERAL INSTRUCTIONS

Please file this statement with the <u>Clerk of the House</u> or the <u>Secretary of the Senate</u> by:

5:00 p.m. on February 15, 2007.

- 2. The report covers you, your spouse, and your dependent children.
- Report only specific sources of income. <u>Dollar amounts need not be listed.</u>
- Campaign contributions duly recorded as required by law need not be reported in this statement.
- 5. Attach additional sheets if needed. Label attachments with your name, address, and the date.
- 6. Please sign on Page 4.
- The completed statements will be posted as a 'pdf' on the Commission's website.
- 8. State law (1 M.R.S.A. § 1018) requires Legislators to file an updated statement with the Commission within 30 days of any change to the information relating to the preceding year. Additionally, the law (1 M.R.S.A. § 1016-B (2)) requires Legislators to make a supplementary statement to the Commission of any reportable liability within 30 days after it is incurred.

DIEASE KEED A	CODY OF THIS	STATEMENT	FOR	VOIR	FILES
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Disclosure statements are made available to members of the public upon request.

Thank you for your cooperation.

PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER. Name each employer from whom you received compensation of \$1,000 or more. Specify also the principal type of economic activity of each employer.

•		Principal Type of Economic
Name of Employer	Address	Activity of Employer
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Treeport Coun	unity 10 bits any i	(m)
Lilona	- voy	•
	•	
Enter the name and add income. If associated w	rith a partnership, firm, professional associat	or Legislators who are self-employed.) jor areas of economic activity from which you derive tion, or similar business entity, list the major areas o
economic activity of the	a entity.	
Name and Address	Major Areas of Economic Activity	Major Areas of Economic Activity
of Business Entity	(self)	(partnership, association or similar business entity)
		·
		person from whom the income was derived. Principal Type of Economic Activity of Entity or Person Who Is the Source of Income
Name of Source	<u>Address</u>	Source of Income
·		
•••		
		·
III 1111		
		•
RT III. MAJOR AREA	S OF PRACTICE. (For Legislators who a law firm, list the major areas of practice of	are attorneys-at-law only.) List your major areas o your firm.
Name and Address of I	Firm <u>Major Areas of Pract</u> (self)	ice <u>Major Areas of Practice</u> (firm)
	,	
	- Warr	

PART IV. OTHER SOURCES OF INCOME. Name each source of income of \$1,000 or more not listed in Parts I, II, or III of this form. Do not include gifts. If none, so state.

	<u>Address</u>	
		*
		·
RT V. DISCLOSURE OF RI 00 or more that you received du list loans from a relative. If none	ring the reporting period, and list the major	names of creditors for any unsecured loans or areas of economic activity of each creditor.
		Principal Type of Economic
Name of Creditor	Address of Creditor	Activity of Creditor
·	•	
	· .	
RT VI. DISCLOSURE OF G	GIFTS. Name the specific source of each	sh gift of more than \$300. Include gifts with
regate value of more than \$300 f	rom a single source. If none, so state.	
regate value of more than \$300 f	rom a single source. If none, so state.	
regate value of more than \$300 f	HONORARIA. List the source of any	
regate value of more than \$300 f	HONORARIA. List the source of any	
regate value of more than \$300 f	HONORARIA. List the source of any	honoraria accepted for appearances or spec
regate value of more than \$300 f	HONORARIA. List the source of any	honoraria accepted for appearances or spec
RT VII. DISCLOSURE OF ated to your official duties. If not	HONORARIA. List the source of any ne, so state. 3. 4. HONORARIA. List the source of any ne, so state. 3. 4.	honoraria accepted for appearances or speed
RT VII. DISCLOSURE OF ated to your official duties. If not are the represented or assisted others for	HONORARIA. List the source of any ne, so state. 3. HONORARIA. List the source of any ne, so state. 3. 4. ON BEFORE STATE AGENCIES. Idear compensation of any amount. If none,	honoraria accepted for appearances or speed
ART VII. DISCLOSURE OF ated to your official duties. If not are the property of the property o	HONORARIA. List the source of any ne, so state. 3. HONORARIA. List the source of any ne, so state. 3. 4. ON BEFORE STATE AGENCIES. Idear compensation of any amount. If none, 3.	honoraria accepted for appearances or speed entify each executive branch agency before whose state.

ART IX. BUSINESS WITH STA our immediate family sold goods or	Services with a value in exces	s of \$1,000 during the report	ing period. If none, so state.
	2		,
ART X. INCOME RECEIVED	67		
ist the type of economic activity rephild(ren) during the reporting period ncome received by spouse and (D) b	d and the kind of income repre	Sellica. The not merge \$110	ed by your spouse or dependent . Indicate (S) beside sources of
Type of Economic Activity			
Representing Each Source of	•	Kind of I	ncome
Income Received		<u>100.00 01 0</u>	000111
1			
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2			
3.			
4	·	<u> </u>	
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1	******	*****	
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The intentional filing of a fal-	se statement shall be a Cl	lass E crime. If the Con	mission concludes that it
appears that a Legislator has Attorney General. If the Cor	willfully filed a false star	tement, ji snan rejer na t a Lagislator has willful	Ilv failed to file a required
Attorney General. If the Constatement or has willfully file	mmission determines that ad a false statement, the I	legislator shall be presu	med to have a conflict of
interest an exercise exection on	d chall be precluded from	n voting on any quesnoi	I IU COMMITTEE OF III ETTITE!
becamely of the Logislature on	ed shall not attempt to int	fluence the outcome of a	ny question. Al Legisiator
who willfully fails to file a re-	quired statement is subje	ect to a civil penaity not	to exceed \$1,000, payable to
the State and recoverable in	a civil action. (1 M.R.S.A	A. § 1019)	
			•
1 1			
Destroke Elm	nd-	1/	4/07
Signa	ture	- 	Date